Statement by a supplier for CSSA Events

Complete this statement if you:

- are an individual or a business
- have supplied goods or services to another enterprise (the payer), and
- are not required to quote an Australia Business Number (ABN)

Payers must withhold 46.5% of the total payment it makes to you for a supply that you make as part of your enterprise you carry on in Australia, unless an ABN has been quoted or there is no need to quote an ABN

HOW TO COMPLETE THE STATEMENT

- Print clearly in BLOCK LETTERS using a black pen only.
- Use BLOCK LETTERS and print one character in each box.

Name of CSSA Event: _____

Payment Amount: $_____

Date: ☐☐☐☐☐☐

Section A: **Supplier details**

1 Your name

2 Your address

Suburb/town

State/territory

Postcode

3 Your reason/s for not quoting an ABN?

☐ The payer is not making the payment in the course of carrying on an enterprise in Australia.

☐ The supplier is an individual aged under 18 years and the payment does not exceed $120 a week.

☐ The payment does not exceed $75, excluding any goods and services tax (GST).

☐ The supply that the payment relates to is wholly input taxed.

The supplier is an individual and has given the payer a written statement to the effect that the supply is either:

☒ made in the course or furtherance of an activity done as a private recreational pursuit or hobby, or

☐ wholly of a private or domestic nature (from the supplier's perspective).

☐ The supply is made by an individual or partnership without a reasonable expectation of profit or gain.

☐ The supplier is not entitled to an ABN as they are not carrying on an enterprise in Australia.

☐ The whole of the payment is exempt income for the supplier.

Section B: **Declaration**

Under pay as you go (PAYG) legislation and guidelines administered by the Tax Office, the named supplier is not quoting an ABN for the current and future supply of goods or services for the reason or reasons indicated.

Signature of Supplier _____

Mobile Number

All Payments are to be made by EFT. Please supply Account name: _____

BSB: _____ **Account Number:** _____

NOTE: You should not accept the appointment as a CSSA official if you have:

- *Been dismissed from any previous employment on the grounds that you were involved in improper conduct of a sexual nature with a student or child; or*
- *Been advised by any employer that your name has been included on a list of those not to be employed in a child-related area of activity.*

⊖ Penalties apply for deliberately making a false or misleading statement.

⊖ Do not send this statement to the Tax Office. Give the completed statement to any payer that you are supplying goods or services to. The payer must keep this document with other records relating to the supply for 5 years.